

**Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions**

A Public Document

1. Agency Name		Date Stamp	California Form 802 For Official Use Only
City of Rocklin			
Division, Department, or Region (if applicable) City Manager's Office		<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.) Date of Original Filing: _____ (month, day, year)	
Designated Agency Contact (Name, Title) Steven Rudolph, City Manager			
Area Code/Phone Number (916) 625.5000	E-mail steven.rudolph@rocklin.ca.us		

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 70.00

Event Description: Rewind Fest - Lost 80's Live Concert Date(s) 09 / 01 / 19
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes No If no: Thunder Valley Casino Resort
Name of Source

Was ticket distribution made at the behest of agency official? Yes No If yes: Rudolph, Steven
Official's Name (Last, First)

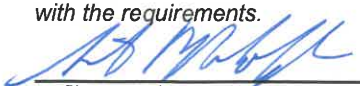
3. Recipients

• Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization.

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
Police Department	2	Ticket Policy Section V.13, Promotion of city-controlled or sponsored event
B. Name of Individual (Last, First)		
	Number of Ticket(s)/ Passes	Identify one of the following: Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
C. Name of Outside Organization (include address and description)		
	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy

4. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

 Steven Rudolph City Manager 6/12/19
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: _____